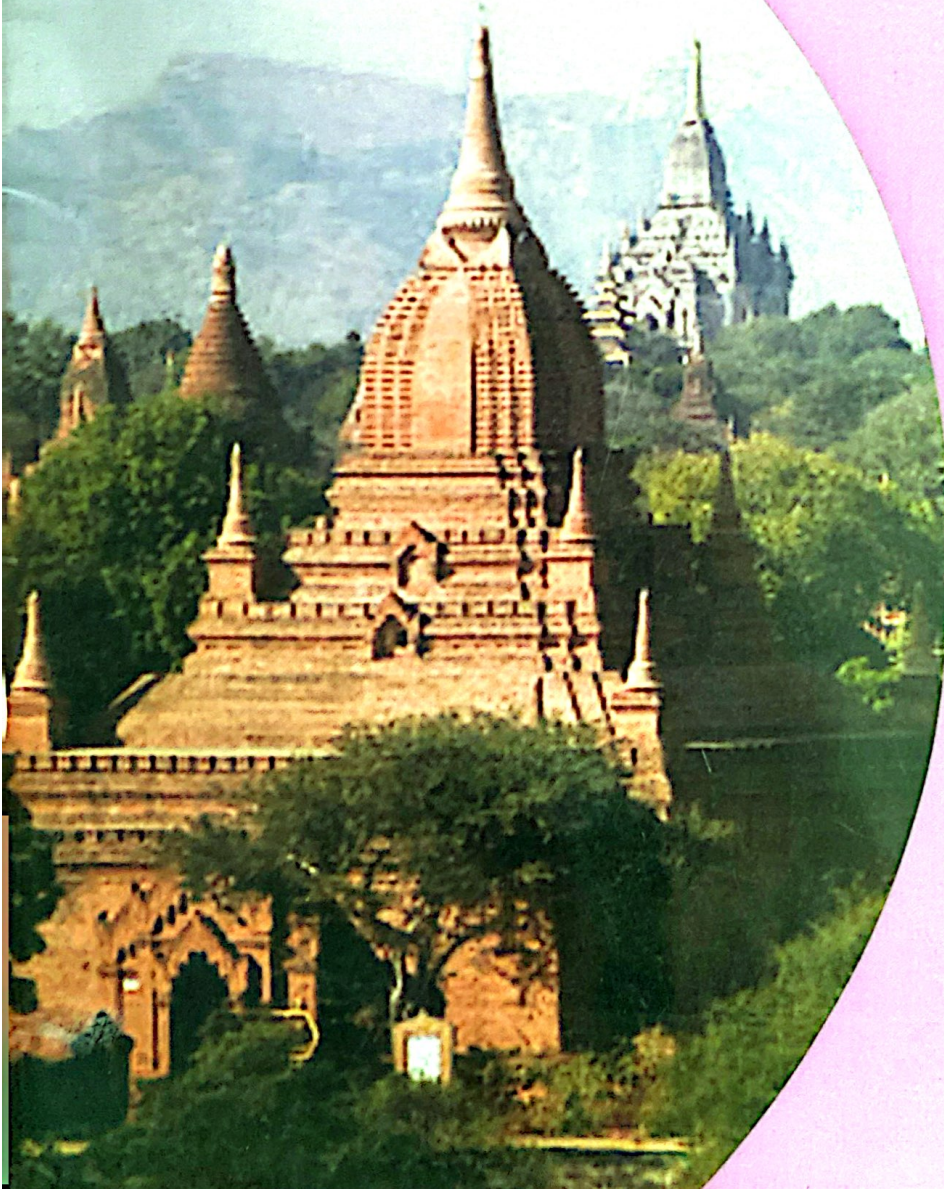




32nd Myanmar Dental Conference and 13th FDI-MDA Joint Educational Meeting

Implants: Envision the Future Dentistry



25th - 28th January, 2012

Sedona Hotel,
Yangon, Myanmar



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Myanmar Dental Conference
and
13th
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Implants: Envision the Future Dentistry

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President's Foreword

First of all, on behalf of Myanmar Dental Association, I would like to wish a joyful and prosperous New Year to all the participants of the 32nd Myanmar Dental Conference and 13th FDI-MDA Joint Educational Meeting. May you all take pleasure in good health and success in the year 2012.

Although Myanmar Dental Association Conferences are convened mainly with the academic objectives of updating our dental professionals with current dental advances, there are also moment for re-union among friends, home and abroad.

Myanmar Dental Association is trying its best to keep abreast with international standards in all aspects of prevention, care and rehabilitation measures, with regards to dental science. Under this year theme of "Implants: Envision the Future Dentistry", this conference will offer a platform to learn and exchange ideas with internationally renowned speakers on the topic of Implantology. We have also carefully selected the current and up to date topics with wide diversity spanning across all fields of Dentistry to suit to different needs of audience.

I also strongly encourage you to take advantage of the presence of exhibiting companies to keep up to date with evolving technologies of equipment and the latest dental materials.

I would like to convey my deepest gratitude to the World Dental Education Society, FDI, the distinguished guest speakers from abroad and all the participating delegates, and last but not the least to the personnel from dental industry who have supported through their goodwill for the Conference.

Professor Thein Tut

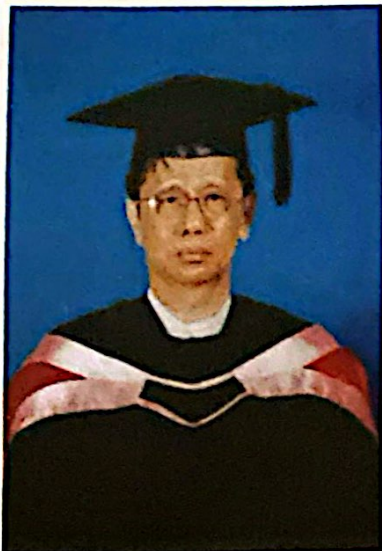
B.D.S., M.Sc. (Manchester)

F.I.C.D., F.I.C.C.D.E.

President

Myanmar Dental Association





Vice-President's Message

Warmest greetings to all the delegates attending the 32nd MDA and 13th FDI-MDA Joint Educational Meeting. For the convenience of all delegates, every effort is made by the reception committee. This year's conference will include renowned speakers and scientists from Asian and European countries as well as our local speakers in scientific session. Dental traders will be exhibiting their products in thirty six booths and the delegates will have the opportunity to select and buy a variety of latest dental products and innovations from various companies. Sports events, gala dinner with interesting entertainment programs and lucky draw sessions will be held on the last day of meeting. I would like to wish you all a very enjoyable, memorable and beneficial participation at the conference.

Professor Pwint Hpoo

B.D.S., M.Sc. (Manchester)

F.I.C.D., F.I.C.C.D.E.

Vice-President



Chairperson of Academic Committee's message

On behalf of Academic Committee of Myanmar Dental Association, I would like to express my warmest welcome to all participants to this 32nd MD conference and 13th FDI-MDA joint educational meeting 2012. First of all, I would like to pay tribute to all members of MDA that make our profession proud, as well as strengthen our association. Education is the most important raw material for development of all societies. We are making a significant contribution by offering everyone the opportunity through Continuing Dental Education (CDE). Our academic committee has been launched this program throughout the year with the support of famous private dental clinics, medical and dental products distributors. I am most grateful for the generous support of the sponsors for our professional connections. The theme of this year's conference is "Implants: Envision the Future Dentistry" which is timely and appropriate. I'm sure all delegates can gain the most updated knowledge regarding the dental implants as well as overall dentistry. We are delighted that many esteemed guests and high level speakers from local and abroad are taking part in this conference. This Conference exceeds our expectations. Never before there have been more than thirty speakers taking part to our conference.

I also encourage you all to take full advantage of this conference. I hope we shall enjoy interesting and fruitful discussions and conversations, gaining and sharing new ideas on our profession and also explore the potential of new technology. At the end of this conference, many of you will see or think of whatever collaborative training and research work you can do with our association.

Professor Swe Swe Win

(Chairperson of Academic Committee)

B.D.S., M.D.Sc., Dr.D.Sc. (Oral Medicine) [Ygn.]

Cert. in Molecular Pathology (Tokyo)

F.I.C.D, F.I.C.C.D.E, F.I.A.O.O.



**MYANMAR DENTAL ASSOCIATION
EXECUTIVE COMMITTEE (2010-2011)**

1. Prof. Thein Tut
2. Prof. Pwint Hpoo
3. Dr. Htay Myint Oo
4. Dr. Shwe Hlaing
5. Dr. Aung Thein Tun
6. Dr. Aye Aye Cho
7. Dr. Aung Than
8. Dr. Khin San Win
9. Prof. Swe Swe Win
10. Dr. Khin Hnin Aye
11. Dr. Sein Mya Aye
12. Dr. Khin Zaw
13. Dr. Myint Htain
14. Dr. Htay Hlaing
15. Assoc. Prof. Kyu Kyu Swe Win
16. Lt. Col. Tin Moe Than
17. Dr. Thein Ngwe
18. Dr. Win Lwin
19. Dr. Ko Ko
20. Assoc. Prof. Zaw Moe Thein
21. Dr. Khin Maung Lay
22. Dr. Linn Pe Than
23. Dr. Hla Myo Naing
24. Dr. Htin Aung

CENTRAL ORGANIZING COMMITTEE

Chairman	Prof. Thein Tut
Vice Chairman	Prof. Pwint Hpoo
Secretary	Dr. Htay Myint Oo
Joint Secretary (1)	Dr. Shwe Hlaing
Joint Secretary (2)	Dr. Aung Thein Tun
Members	Dr. Aung Than Dr. Aye Aye Cho Prof. Swe Swe Win Dr. Khin San Win Dr. Sein Mya Aye Dr. Khin Zaw Dr. Myint Htain Dr. Thein Ngwe Dr. Ko Ko

ACADEMIC COMMITTEE

Chairman	Professor Swe Swe Win
Vice-Chairman	Dr. Win Lwin
Secretary	Assoc. Prof. Zaw Moe Thein
Jt. Secretary (1)	Dr. Myat Nyan
Jt. Secretary (2)	Dr. Soe Naing
Members	Dr. Moe Thida Htwe Dr. Khin Sandar Tun Dr. Win Pa Pa Aung Dr. Nandar Aung Dr. Soe Yu Paing Dr. Yi Mon Shwe Dr. Hnin Ei Phyo Dr. Thar Htet San Dr. Thant Phyu Sin Dr. Kyippar Lwin Dr. Theint Theint Than Wai Dr. Nan Nway Nway Aung Dr. Zar Chi Kyaw Myint Dr. Zar Chi Wint Dr. Su Mon Than Dr. Win Ngu War Dr. Khaing Sabai Htwe

RECEPTION COMMITTEE

Chairman	Professor Pwint Hpoo
Vice-Chairman	Dr. Shwe Hlaing

SECRETARIAT

Decoration	Dr. Aung Thein Tun
Meal & Refreshments	Dr. Khin San Win
Entertainment	Dr. Ko Ko

MEMBERS (Decoration)

Dr. Kyaw Min
Dr. Myo Thet Tun

MEMBERS (Meal & Refreshments)

Dr. Tin Moe Than
Dr. Khin Hnin Aye
Dr. Soe Thinzar Maung
Dr. Khin Khin Gyi
Dr. Khaing Mi Kyaw
Dr. Kyu Kyu Swe Win
Dr. Yi Yi Soe

Dr. Thiri Kyaw
Dr. Aung Thu Hein

MEMBERS (Entertainment)

Dr. Aung Min Naing
Dr. Thein Tun Oo
Dr. Kyaw Naing
Dr. Kyaw Htwe

SOCIAL COMMITTEE

Chairman	Dr. Khin Zaw
Secretary	Dr. Khin Maung Lay
Members	Dr. Min Han Dr. Nyan Soe Dr. Win Pe Myint Dr. Wai Phyo

SPORTS COMMITTEE

Chairman	Dr. Thein Ngwe
Secretary	Dr. Hla Myo Naing
Members	Dr. Min Han Dr. Win Bo Dr. Khat Naing

INFORMATION COMMITTEE

Chairman	Dr. Sein Mya Aye
Secretary	Dr. Htin Aung
Members	Dr. Maung Maung Cho Dr. Kyaw Kyaw Myint Dr. Lin Lin Oo Dr. Phyo Oo Dr. Min Khaing Win Myint Dr. Maung Maung Moe Wai Myint

CREDENTIAL COMMITTEE

Chairman	Dr. Aye Aye Cho
Secretary	Dr. Htay Hlaing
Members	Dr. Khin San Win Dr. Tin Moe Than Dr. Khin Hnin Aye Dr. Kyu Kyu Swe Win Dr. Nilar Aung Dr. Mya Eain San Dr. Su Sandi Maung Dr. Soe Thinzar Maung Dr. Khin Khin Gyi Dr. Khaing Mi Kyaw Dr. Myat Kaythwe Lin Dr. Khin Khin Shein

DISCIPLINARY COMMITTEE

Chairman	Dr. Myint Htain
Secretary	Dr. Linn Pe Than
Members	Dr. Thant Zaw Naing Dr. Nay Myo Hlaing Dr. Zeya Swe Dr. Zaw Phyo Wai Dr. Zin Phyo Naing

Attention

1. Registration Date - 23th, 24th January, 2012
Time - 9:00 - 14:00hrs
Venue - Sedona Hotel, Kabar Aye Pagoda Road.
2. Registration fees - 35000 Kyats (members only)
3. Single entry tickets for lecture talks in academic sessions and exhibition booths - 10000 Kyats
4. Conference dinner will be held on 28th January, 2012 at Sedona Hotel, Kabar Aye Pagoda Road.

Notice

General Discussion Session

25th January 2012 11:00 hrs

Forward the items for discussion to central organising committee by 16:00 hrs, 24th January 2012.

Day I

25th January 2012	9:00 hrs	BREAKFAST	Sponsored by EAC Co., Ltd.
(Wednesday)	11:45 hrs	LUNCH	Sponsored by MDA
	15:10 hrs	TEA	Sponsored by MDA

Day II

26th January 2012	11:40 hrs	LUNCH	Sponsored by MDA
(Thursday)	15:30 hrs	TEA	Sponsored by MDA

Day III

27th January 2012	12:45 hrs	LUNCH	Sponsored by MDA
(Friday)	15:30 hrs	TEA	Sponsored by MDA

Day IV

28th January 2012	18:30 hrs	DINNER	Sponsored by MDA & LASER (SEDONA Hotel)
(Saturday)			

Inaugural Session Programme

Day I - Wednesday, 25th January, 2012

Grand Ball Room, Sedona Hotel

Time	Item
8:30 hrs - 9:30 hrs	Inaugural Ceremony
9:30 hrs - 10:00 hrs	Ceremony for paying Homage to Elderly Dental Surgeons
10:00 hrs - 11:15 hrs	General Assembly
10:00 hrs - 10:10 hrs	President's Address, Prof. Thein Tut
10:10 hrs - 10:20 hrs	Speech by FDI Representative Assoc. Prof. Willian Cheung
10:20 hrs - 10:30 hrs	Welcome speech by Chairman of the Reception Committee, Prof. Pwint Hpoo
10:30 hrs - 10:40 hrs	Annual Report of Executive Committee by General Secretary, Dr. Htay Myint Oo
10:40 hrs - 11:00 hrs	Announcement of Election Results
11:00 hrs - 11:45 hrs	General Discussion

Academic Session Programme

Day I	25th January 2012	Grand Ball Room, Sedona Hotel
12:30 – 12:40	Opening speech by Chairperson of Academic Committee Prof. Swe Swe Win	
12:40 – 14:10	Chairperson: Prof. Paing Soe	
	SUCCESS in Practice Prof. William Cheung	
14:10 – 15:10	Common Oral Lesions in General Medical Practices Dr. Saw Aung	
15:10 – 15:30	Tea break	
15:30 – 16:00	Chairperson: Prof. Saw Tun Aung	
	Dental Public Health - a long term strategy for Oral Health? Dr. Juliane Frühbuss	
16:00 – 16:30	MiCD- A Paradigm Shift Dr. Shriju Joshi	
16:30 – 17:00	Digital Dentistry Mr. Wolfgang Braun	

Day II	26th January 2012	Grand Ball Room, Sedona Hotel
8:30 – 9:00	Chairperson: Prof. Thein Kyu	
	Management of ameloblastoma Prof. Htay Htay Yi & Prof. Swe Swe Win	
9:00 – 10:00	Role of Nanobacteria in dental practice Prof. Khin Maung Lwin	
10:00 – 10:20	Use of Lycopene in oral potentially malignant disorders Dr. Win Pa Pa Aung	
10:20 – 11:00	Recent reform of Japanese Dental Education Prof. Kazuhiro Eto	
11:00 – 11:40	Orthodontic treatment using mini-implant: Various applications and biomechanical considerations Assoc. Prof. Sung-Hoon Lim	
11:40 – 12:40	Lunch break	
12:40 – 13:30	Chairperson: Prof. Ba Myint	
	Periodontal treatment for General Practitioners Prof. Jin Li-jian	
13:30 – 14:30	Implant Rehabilitation Dr. Thomas Ip	
14:30 – 15:30	Oral white lesions, red lesions and ulcers: are they premalignant or malignant? Prof. Khoo Suan Phaik	

15:30 – 15:50	Tea break
15:50 – 16:20	Chairperson: Prof. Pwint Hpoo
	Peopling of Myanmar as Demonstrated by Genotyping of Urinary JC Virus DNA Prof. Norikazu Ohno
16:20 – 16:40	Dental Traits among Five Tribes in Myanmar (Burma) Dr. Nwe Nwe Aung
16:40 – 17:00	Does visual perception have more impact for effective learning in dental anatomy (Tooth carving practical session) Dr. Bo Bo
17:00 – 17:40	Direct or Indirect Restoration? Dr. Norhasnida Nordin

Day III	27th January 2012	Grand Ball Room, Sedona Hotel
8:30 – 9:00	Chairperson: Prof. Tin Tun Hla	
	Basic Life Support for General Dental practitioner Dr. Ni Ni Win	
9:00 – 10:00	Managing change Prof. Aung Tun Thet	
10:00 – 10:30	Monitoring and Intravenous Sedation for Dental Implantation Prof. Masahiro Umino	
10:30 – 11:00	A New Electric Injector for Infiltration Anesthesia Prof. Haruhisa Fukayama	
11:00 – 11:30	Chairperson: Prof. Myo Win	
	Clinical Outcome of Various Types of Bone Substitute Assoc. Prof. Makoto Shiota	
11:30 – 12:00	Titanium implant: the IAT EXA Implant in Japan Assoc. Prof. Susumu Nakachi	
12:00 – 12:45	Trends Technology and innovations in Implantology Prof. Ashish Kakar	
12:45 – 13:50	Lunch break	
13:50 – 14:10	Chairperson: Prof. Htay Htay Yi/ Prof. Sun Sun Win	
	A study of the method for taking natural head position cephalogram Dr. Thet Naing	
14:10 – 14:30	Intraosseous hemangioma of the mandible: A case report Dr. Tin Aung	
14:30 – 14:50	Use of Interdental Brush (Modified Oral Brush Biopsy) in Evaluation of Potentially Malignant Disorders of Oral Mucosa Dr. Kumudra Kyaw	
14:50 – 15:10	Maturational Evaluation of Ossification of the Mid-palatal Suture Dr. Aye Mya Thida	

15:10 – 15:30	The effectiveness of submucosal injection and oral dexamethazone in post-operative morbidity of impacted third molar surgery Dr. Thiha Myint Wei
15:30 – 15:50	Tea break
15:50 – 16:10	Chairperson: Prof. Myint Myint San
	A study of effectiveness of soft lining in poorly fitting complete dentures Dr. Aung Thu Hein
16:10 – 16:30	Assessment of Oral Health Status and Awareness of Dental Problems among Young Female Adults Dr. Saw Nanda Aung
16:30 – 16:50	Oral health impact profile among Myanmar migrants, in Rangsit, Pathum Thani Province, Thailand Dr. Aye Thet Oo
16:50 – 17:10	Correlation between sulcular and capillary blood glucose levels in periodontal patients by using glucometer Dr. San Thida Aung
End of Program	

Day I, 25 January 2012, 12:40 – 14:10



Prof. William Cheung



Education

- D.M.D. Univ. of Pennsylvania, U.S.A., 1981
- M.S. Cornell University, U.S.A., 1978
- B.S. Wilkes University, U.S.A., 1976
- Honors & Appointments
- Honorary Professor, West China School of Stomatology, Sichuan University, China
- Honorary Associate Professor, University of Hong Kong Faculty of Dentistry

- Honorary Lecturer, University of Pennsylvania School of Dental Medicine
- Fellow, Academy of General Dentistry (F.A.G.D.)
- Fellow, Academy of Dentistry International (F.A.D.I.)
- International Who's Who of Professionals, 2001
- Award for Promotion of Academic Exchange and Collaboration, 1st Global Congress of Chinese Dentists, Xiamen, China 2010
- Alumni Award of Merits, University of Pennsylvania School of Dental Medicine, May 2011

Professional Services

- FDI World Dental Federation Continuing Education Programme Director for Asia Pacific (2006–present)
- Honorary Council Member, Chinese Stomatological Association, 2011-16
- Founding Chairman, Patient Complaints Mediation Committee, Hong Kong Dental Association (2002-2008)
- Member, Professional Education Committee, Hong Kong Dental Association
- Member, American Dental Association
- Over 10 publications in various professional journals
- Numerous lectures given worldwide including the FDI World Dental Congress in 2006, 2010 and 2011, Asia-Pacific Dental Congress in 2006 & 2009
- International Editorial Board, Journal of the American Dental Association (JADA)
- Editorial Board, JADA Chinese Edition, 2011-Present
- Associate Editor, Hong Kong Dental Journal (HKDJ)
- Editorial Advisor Board: Dental Journal (Indonesia), Dental Asia and Dental Practice News

Other Services

- Member, Board of Trustees, University of Pennsylvania,
- Chairman, Board of Overseers, University of Pennsylvania School of Dental Medicine, U.S.A.
- Member, Alumni Board, University of Pennsylvania,
- Member, Working Group on English Alliance, Standing Committee on Language Education & Research, Hong Kong, 2008-2009

Title: Planning for SUCCESS in Practice

Abstract: Starting and building a private dental practice today can be very challenging for a number of reasons. These include the higher level of education among our patient population leading to higher expectations, the availability of more sophisticated but expensive equipment and instruments as well as the vast amount of new knowledge discovered on a daily basis. I will begin this presentation by first defining what it means to be "successful" in private practice. The main objective is to present and discuss the ingredients important to achieve success in relation to:

Staff

- U – The CEO
- Clinical skill
- Communication
- Equipment
- Sterilization
- Service

Day I, 25 January 2012, 14:10 – 15:10

**Dr. Saw Aung****Education Background, Working and teaching experiences**

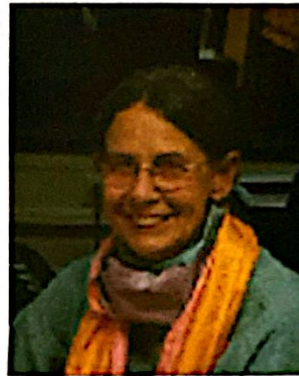
Senior Staff Specialist Physician (Senior Consultant) Director of Physician Training Shellharbour Hospital/ Wollongong Hospital Illawarra Shoalhaven Local Health Service. New South Wales, Australia. Clinical Academic Representative Graduate School of Medicine, University of Wollongong NSW, Australia

He was graduated from Institute of Medicine 1 (RGN) in 1974 and finished Hospital Internship in 1975. He worked as Demonstrator in Institute of Dental Medicine, Physiology Dept from 1978 to 1982 and was Selected by Ministry of Health, for Basic Physician Training for MRCP (UK) in 1982. He was awarded British Council Scholarship for training in internal medicine and renal medicine in UK from 1984 to 1986. Then he passed MRCP(UK) and completed training in UK at Warrington General Hospital, Cheshire and Western General Hospital, Edinburgh. He was First Assistant Physician (Senior Registrar) at Rangoon General Hospital from 1987 to 1989 and Consultant Physician at Private Hospitals and medical centres in Rangoon from 1989 to 1993. Then he worked as Consultant Physician at Kuala Lipis Hospital, Pahang state in Malaysia from 1993 to 2000. He was admitted as Fellow of Royal College of Physician, Edinburgh in 2000. Then he worked as Consultant Physician at Royal Melbourne Hospital, Melbourne Extended Care and Rehabilitation Service in Melbourne, Victoria, Australia from 2000 to 2002, Senior Staff Physician (Senior Consultant) at Dubbo Base Hospital, NSW Australia from 2002 to 2010. He was admitted as Fellow of Royal Australasian College of Physician in 2004 and Director Physician Training and Senior Clinical Lecturer , Dubbo Rural Clinical School, University of Sydney from 2004 to 2010.

Title: Common Oral Lesions in General Medical Practices

Abstract: It has always been a challenge to diagnose and treat lesions in the mouth, gum and lips for most of the clinicians. It is because wide variety of disorders can present with similar appearances and our clinicians have inadequate training and experiences. Most of the oral lesions are associated with systemic diseases and dental practitioners also would have trouble getting the diagnosis if they do not have enough training and exposure in general medicine. Most of the clinicians surveyed, admitted it was important to examine the mouth of the patients, especially elderly, but majority failed to perform routine oral examination and missed the important diagnosis. This presentation will discuss about the most common oral lesions, how to diagnose and manage properly. Proper examination, both oral and whole body, is the key to detect lesions, diagnose and manage it.

Day I, 25 January 2012, 15:30 – 16:00

**Dr. Juliane Frühbuss****Qualification**

1. Bachelor in economics, University of Applied Sciences of Berlin, 1974
2. Graduation in dentistry, Free University of Berlin, 1978
3. Master of Public Health, Heinrich-Heine-University of Düsseldorf, 1993
4. Doctorate in dentistry, Free University of Berlin, 1997

Function

Since 2002: Free lancer at the Academy of Pubic Health and the Ärztekammer (board of medical doctors), Duesseldorf, Germany;

-Regular courses, teaching and training of dental doctors and dental nurses in the public health sector in Germany;

-Regular courses (8 weeks a year) Scientific coordination of training courses in "Social Medicine" as a specialisation at the Aertekammer (board of medical doctors) in North-Rhine-Westphalia, Germany (teaching and training in social medicine);

From 1994 to 2002: Establishment of a new School of Public Health and Scientific Coordinator of Public Health Training at the Heinrich-Heine-University in Duesseldorf, Germany;

-Cooperation with the School of Public Health at the University of Ulan Bator in Mongolia, workshops and training in Ulan Bator 2002 and 2004;

-Lecturer at Heinrich-Heine-University and Academy of Public Health, Duesseldorf: European Care Health Systems, Health Economics, Microeconomics, Human Resource Management, Quality management, Prevention and Health Promotion;

-PEER REVIEW as a Member of ASPHER (Association of Schools of Public Health in the European Region);

From 1983 to 1997: Dental practise, together with Axel Frühbuss (husband) Speciality: endodontic and orthodontic treatment, conservative treatment, child dental care and prevention;

From 1980 to 1983: sailing on a small sailing boat from Germany to the Polynesian Islands

From 1978 to 1980: professional training in a dental practice, Berlin

Title : Dental Public Health - a long term strategy for Oral Health?

Abstract : Oral Health is often a low priority problem to individuals, governments and policy-makers but the impact of oral diseases can range between effects on General Health and Quality of Life. Oral Health is defined as an integral part of General Health and it is to consider the consequences of pain, discomfort, limitation of eating habits, psycho-social problems on time of absence from school and working place. The definition of Dental Public Health in short is the "science and art of preventing and controlling Dental Diseases and promoting Dental Health through organised community efforts". That also means it is concern for and activity directed toward better Oral Health of the population.

Why we consider Oral Health as a Public Health Problem? We know already since long that oral disease is largely preventable. Oral diseases are a widespread actual cause of morbidity and there is a body of knowledge of preventive measures not being applied on the population.

Oral health behaviour is also strongly influenced by family, social environment and the community. Effective Dental Public Health strategies in Kindergarten and schools are required to prevent oral disease and to influence future health behaviour. It is also the question of professional ethics to prevent a disease better then to cure. In low income countries treatment is not a solution for the whole population, because it is only affordable for the middle and upper class and will cause inequalities in health.

In a lot of countries worldwide, there is a remarkable change in the economic and social situation with a large influence on lifestyle e.g. nutrition, eating habits and health behaviour in general. The planning and implementation of future preventive and health promotion strategies should be based on evidence based programs and to be discussed within the Dental Community of the country.

Day I, 25 January 2012, 16:00 – 16:30



Dr. Shriju Joshi



Dr. Shriju Joshi is the Senior Product Manager for Shofu Inc., Singapore. She graduated with a Bachelor of Dental Sciences degree in 2001 from the College of Dental Surgery, Manipal, India following which she gained clinical experience at the National Dental Hospital and a private dental practice in Kathmandu. She is a life member of the Nepal Dental Association.

Prior to joining Shofu, she did research work for a year at the Tissue Modulation Laboratory, National University of Singapore, and helped with the project that investigated the development of novel assays to quantitate collagen in cell culture media and extracts. Dr. Shriju has presented at various events internationally on the direct as well as indirect aspects of restorative dentistry.

Title: MiCD- A Paradigm Shift

Abstract: Minimally invasive techniques have been successfully integrated in oral healthcare in recent years enabling the clinician to select treatment protocols that preserve sound oral tissues and assure predictable long-term results. Biomimetic aesthetic restorative materials and modern adhesive technology have revolutionized the way cosmetic dentistry is practiced by presenting a less invasive options.

Minimally invasive cosmetic dentistry (MiCD) advocates a phased treatment protocol that encourages the adoption of the least invasive treatment techniques while achieving dramatic aesthetic results.

Discover how this paradigm shift in cosmetic dentistry has broadened treatment modalities to accentuate your patient's smile aesthetics.

A contemporary approach to traditional smile makeovers, that is less invasive, not only insures healthy tooth structure for better prognosis but increase patient acceptance, reduces treatment time and protects against future complications.

This interesting lecture highlights the practical aspects of minimally invasive cosmetic dentistry, elucidated with useful hints, tips and tricks to maximize aesthetic outcome and minimize tooth loss in real clinical situations.

Day I, 25 January 2012, 16:30 – 17:00



Mr. Wolfgang Braun



01.01.2006 – 14.12.2008
SIRONA DENTAL SYSTEMS
Position: Business Development Manager, X-ray ASIA, Shanghai, China
01.01.2002 - 31.12.2005
SIRONA DENTAL SYSTEMS
Position: Business Development Manager, Seoul, South Korea
01.01.1999 - 31.12.2001
SIRONA DENTAL SYSTEMS
Position: Executive Service Manager, 25 Technicians worldwide, Bensheim

Projekt SAP – Management SW for SIRONA

01.10.1990 - 31.12.1998 Siemens Division Medical / SIRONA DENTAL SYSTEMS

Position: Deputy Service Manager, Bensheim
6 month Service Manager SIEMENS Dental, Berlin
Seminar for Executive Manager, several further educations

01.10.1984 - 31.09.1990 Siemens Division Medical
Position: Service Technician worldwide, SIEMENS Dental, Bensheim

01.01.1981 - 30.09.1984 Siemens Division Medical
Position: Service Technician regional, Siemens Dental, Nuernberg
Education Electrotechnique (Evening school !)

Title: Digital dentistry

Abstract: Introduction of the recent available digital products for dentistry, like treatment center, X-ray systems and CAD/CAM systems (Digital Ceramic restoration).

Most important is the result and the advantages of using digital products in dentistry, regarding accuracy, efficiency. These products are proved in dentistry, looking at the launch to the world markets.

Digital Treatment centers in 1990,

Digital X-ray systems in 1993

CAD/CAM systems in 1988

Product innovations in dentistry will be more and more on the Software part and the according applications.

Day II, 26 January 2012, 8:30 – 9:00



Prof. Htay Htay Yi

Education background

B.D.S. in Institute of Dental Medicine(Ygn.), 1973-1980
M.D.Sc. in Institute of Dental Medicine(Ygn.), 1992-1994
F.I.C.C.D.E., 2001
Dr. Med. Sc. (Oral & Maxillofacial Surgery) in Institute of Medicine (1), 2002- 2005
F.I.C.D., 2006

Working and teaching experiences

Dental Surgeon, School Health, Maymyo, 1984 - 1985
Dental Surgeon, School Health, Meihitla, 1985 - 1986
Dental Surgeon, Rural Health Centre, Mawlamyaing, 1986 - 1990
Demonstrator, Dept.of Oral & Maxillofacial Surgery, Institute of Dental Medicine(Ygn.), 1990-1996
Assistant lecturer, Dept.of Oral & Maxillofacial Surgery, Institute of Dental Medicine(Ygn.), 1996 - 1998
Lecturer, Dept.of Oral & Maxillofacial Surgery, Institute of Dental Medicine(Ygn.), 1998 - 2002
PG Lecturer / Head, Dept.of Oral & Maxillofacial Surgery, Institute of Dental Medicine(Mdy.), 2002 - 2004
Professor / Head, Dept.of Oral & Maxillofacial Surgery, University of Dental Medicine(Mdy.), 2004 - 2010
Professor / Head, Dept.of Oral & Maxillofacial Surgery, University of Dental Medicine(Yangon), 2010 – up to now

Academic Activities

Myanmar Dental association - Member since 1980
Myanmar Dental association - EC member in 1998
Myanmar Academy of Medical Science - Member since (20 - 4 - 2005)
International Association of Dental Research (SEA Div;) - Member since 1998
Red Cross - Member
President of MDA, Mandalay division from 2008 to 2009
Secretary of IADR, Myanmar Section in 2010 onwards



Prof. Swe Swe Win

Education background

B.D.S 1978, Institute of Dental Medicine, Yangon
M.D.Sc - 1994
Dr.D.Sc (Oral Medicine) - 2006
Cert. in Molecular Pathology, Tokyo Medical and Dental University - 1998
F.I.C.C.D.E (International College of Continuing Dental Education) - 2001
F.I.C.D (International College of Dentist) - 2001
F.I.A.O.O (International Academy of Oral Oncology) - 2006

Working and teaching experiences

Civil dental surgeon, Department of Health, Ministry of Health, 1982 - 1989
Demonstrator, Department of Oral Medicine, Institute of Dental Medicine, Yangon, 1989 - 1995
Assistant Lecturer, Department of Oral Medicine, 1995 - 1997
Lecturer, Department of Oral Medicine, University of Dental Medicine, 1997 - 2004
Post-graduate Lecturer, Department of Oral Medicine, University of Dental Medicine, 2004 - 2006
Professor/Head, Department of Oral Medicine, University of Dental Medicine, 2006 - To date

Publications

1. Detection of Candida albicans by PCR from formalin fixed paraffin embedded tissue specimens, Japanese Journal of oral Biology, 2000
2. Detection of p53, bax, Rb, p16 and human papillomavirus DNA in betel quid associated oral squamous cell carcinoma in Myanmar, Oral Medicine & Pathology, 2003
3. Assessment of p53 protein expression in leukoplakia, oral submucous fibrosis and oral lichen planus in Myanmar patients, Oral Medicine & Pathology, 2005
4. Activation of ERF1/2 and cyclin D1 expression in oral tongue squamous cell carcinomas: Relationship between clinicopathological appearance and cell proliferation, Oral Oncology, 2006

Academic Activities

Chairperson, Academic Committee,
Myanmar Dental Association
Member, International Association for Dental Research

Title: Management of ameloblastoma

Abstract: The Ameloblastoma is the most frequently encountered of all the odontogenic tumours. The ameloblastoma cases treated at the Department of Oral and Maxillofacial Surgery, University of Dental Medicine from 2010 to 2011 will be discussed. During the period of 2 years, there were 24 cases with no sex predilection and the youngest age was 6 years old. Radiologically multilocular appearance, histopathologically mural ameloblastoma were by far the most commonly seen. Either enucleation or surgical resection was carried out. Recurrence rate still cannot be appreciated due to relatively few operated cases with sufficient follow up periods.

Day II 26 January 2012 9:00 – 10:00

**Prof. Khin Maung Lwin****Education Background, Working and teaching experiences**

He was graduated from the Institute of Medicine (2) Yangon in 1984. He served for Myanmar Army Medical Corp for more than five years. He obtained the Dip in Natural Medicine from the London School of Natural Medicine, in UK, M.Sc and Ph.D in Alternative Medicine, specialized in Phytomedicine,

from Trinity College and University from USA in 2001. He also received Doctor of Business Administration for the Management in Pharmaceutical Industry from the Concordia College and University from USA. He is also a professional member of : Myanmar Medical Association, Myanmar, International Herb Association, USA, Herb Research Foundation, USA, American Botanical Council, USA, British Herbal Medical Association, UK, European Biochemical Society, UK. He has been giving a series of lectures regarding Phytochemistry and Phytopharmaceuticals, since 2001. Therefore, he was honored as Visiting Professor by the Trinity College and University of USA in 2001 and also as an Honorary Professor of the University of Traditional Medicine by the Ministry of Health of the Union of Myanmar, Mandalay, Myanmar in 2004. He is a founder of FAME Pharmaceuticals, which was established in 1994, producing a wide range of best quality natural medicines. FAME Pharmaceuticals has been honored nationally and internationally by getting;

1. GMP (Good Manufacturing Practice) Certificate from the Ministry of Health of the Union of Myanmar, in 2002.
2. ISO 9001:2008 (Quality Management System) certificate from the BVQI of UK, 2002
3. ISO 14001:2004 (Environment Management System) certificate from the BVQI of UK, in 2006.
4. OHSAS 18001:2007 (Occupational Health and Safety Assessment System) certificate from the BVQI of UK in 2006.
5. A series of quality awards from Germany, France, Switzerland, Hong Kong, China, and Myanmar.
6. Organic Certificate from the Myanmar Organic Agriculture Group in 2010
7. Organic Certificate from the Thailand (ACT) IFOAM Accredited in 2010
8. ASEAN Business Award in 2010

Now, he is Managing Director of FAME Pharmaceuticals, doing research and development, manufacturing, distributing and exporting the Natural Medicines. He has been continuously sharing his knowledge on Natural Medicine among Myanmar Medical Doctors and Myanmar People.

Title: Role of Nanobacteria in dental practice

Objective: To have knowledge about nanomedicine and nanobacteria in daily dental practice

Day II 26 January 2012 10:00 – 10:20

**Dr. Win Pa Pa Aung****Education background**

University of Dental Medicine (Yangon) 1994-2001, First Year to Final Year (BDS)
University of Dental Medicine (Yangon), 2001-2002, House Surgeon
University of Dental Medicine (Yangon), 2006-Upto now, First Year & Second Year (MDS)
M.D.Sc Dissertation Title "Evaluation Of Epithelial Cell Proliferation In Oral Lichen Planus By Using Ki-67 Cell Proliferative Marker"

Working and teaching experience

1. Health Centre , Sept 2002- Dec 2005, Dental Surgeon (Ahlone Township)
2. Department of Oral Medicine, University of Dental Medicine, Dec 2005-Upto now, Demonstrator
3. "SS" Dental Clinic, May 2001-June 2002, Dental Assistant
4. "Swan" Dental Clinic, June 2002-Upto now, Dental Surgeon

Title: Use of Lycopene in oral potentially malignant disorders

Abstract: Oral malignancy is one of the most common malignancies leading to death worldwide and ranks 6th among all cancers. It could be preceded by clinically evident oral potentially malignant disorders (OPMDs) which are morphologically altered tissue and have greater risk of transforming into malignancy.

Lycopene is a natural pigment synthesized by plants and microorganisms. It is accumulated in relatively few tissues and can most easily be seen in ripe tomatoes, watermelons, grapefruits, guavas, rosehips and red chili, giving them characteristic red color. Tomato and tomato-based foods account for more than 85% of all the dietary source of lycopene. With respect to its antioxidant activity, plays potential role in the prevention and treatment of chronic diseases and also has some beneficial effects in the treatment of certain diseases of oral cavity including oral cancer and precancerous lesions. 72 patients with OPMDs mainly oral submucous fibrosis, oral lichen planus and oral leukoplakia were included in this study. The use of lycopene (Tomatec®_ FAME pharmaceuticals) alone, combination with intra-lesional steroid injection in management of OPMDs will be discussed along with reported cases.

Day II 26 January 2012 10:20 – 11:00



Prof. Kazuhiro Eto



Curriculum Vitae
President, Japanese
Association for Dental Science
Emeritus Professor, Tokyo
Medical and Dental University
Guest Professor, Nippon
Dental University, School of
Life Dentistry

Prof. Eto graduated as dentist in 1967. He obtained his PhD in 1971. He was Visiting Associate in the laboratories of Developmental Biology and Anomalies, NIDR, NIH, United States in the period 1973-1976. Since 1978, he is Professor at the Faculty of Dentistry, Tokyo Medical and Dental University. He was Chairman of the Molecular Craniofacial Embryology Department, Dean of the Faculty of Dentistry, Dean of the Graduate School and Vice President of Tokyo Medical and Dental University.

Title : Recent reform of Japanese Dental Education

Day II 26 January 2012 11:00 – 11:40



Assoc. Prof. Sung-Hoon Lim



Educational Background
Graduated from School of
Dentistry, Chosun University
Graduate School (M.S.D.
course of Orthodontics),
Chosun University
Graduate School (Ph.D course
of Orthodontics), Seoul
National University
Orthodontic training: One
year internship and three
year resident course in
Department of Orthodontics,
Chosun University Dental
Hospital

Academic Appointments

2002 May-2004 August	-	full time lecturer
2004 Sept-2007 August	-	Assistant Professor
2007 Sept-present	-	Associate Professor, Department of Orthodontics, School of Dentistry, Chosun University

Professional Services

2003-present	-	Reviewer, Korean Journal of Orthodontics
2006-2007	-	Member of the Academic Committee, Korean Association of Orthodontics
2008-2009	-	Director of Education, Korean Association of Orthodontists
2010-present	-	Director of Planning, Korean Association of Orthodontists

Title: Orthodontic treatment using mini-implant: Various applications and biomechanical considerations

Abstract: Orthodontic mini-implant can be used as an anchorage for tooth movement in fixed orthodontic treatment. Most frequently, orthodontic mini-implants are placed between maxillary 2nd premolars and 1st molars to reinforce anchorage during extraction space closure. Other applications include distalization of maxillary or mandibular posterior teeth to correct molar relations or to gain space for alignment, and intrusion of molars to improve open bite, and uprighting of mesially tipped molars and intrusion of molars which have been extruded into opposite edentulous area. In these complicated applications of orthodontic mini-implants, understanding of biomechanics is mandatory to avoid uncontrolled tooth movement. In this presentation, various applications of orthodontic mini-implants and analysis of their force systems will be presented. Also, suitable areas for mini-implant placement will be discussed using CBCT images.

Day II 26 January 2012 12:40 – 13:40



Prof. Jin Li-jian



Education background, teaching and working experiences

- Obtained his dental degree at Zhejiang University and his PhD at Peking University, China
- Professor of Periodontology, Postgraduate Program Director in Periodontology (Conjoint Program), Associate Dean (Mainland & Global Affairs) at The University of Hong Kong Faculty of Dentistry

- FDI World Dental Federation Science Committee Vice Chair
- Councilor of both the IADR South-East Asia Division and Asia Pacific Society of Periodontology
- Lectured internationally
- Published over 95 journal papers and book chapters, and over 160 reprinted abstracts and reports

Title: Periodontal Care in General Dental Practice

Learning Objectives:

1. Appreciating the update on periodontal etiopathogenesis and the relevant clinical implications
2. Understanding periodontal care as a foundation of general dental practice
3. Knowing various innovative approaches in basic periodontal care

Day II 26 January 2011 13:40 – 14:40



Dr. Thomas Ip



Education background

- Received his DMD at the University of The East Philippines
- Chairman of Star Alliance in Hong Kong and Shanghai
- Fellow of Academy of Dentistry International

Title: Dental Implant Rehabilitation for Fully Edentulous Patients

Objectives:

1. To understand the available options for treatment of fully edentulous patients in implant dentistry
2. To plan for patients in different modalities of treatment

Day II 26 January 2012 14:40 – 15:30

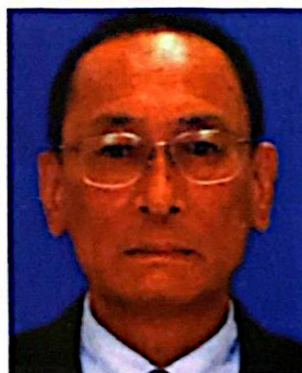
**Prof. Khoo Suan Phaik**

Dr. Khoo Suan Phaik is a Professor of Oral Pathology and Oral Medicine at the school of Dentistry, International Medical University, Malaysia. She graduated from Universiti Malaya and obtained her Masters and Fellowship in Oral Pathology and Oral Medicine from the Eastman Dental Institute, UK and from the Faculty of Dentistry Royal College of Surgeons of Ireland. She went on to obtain her PhD from NUS in Singapore. Amongst her clinical and laboratory special interests are oral cancers and regenerative dentistry.

Title: Oral white lesions, red lesions and ulcers: are they premalignant or malignant?

Abstract: A large number of oral malignancies develop from existing premalignant lesions. Although the oral cavity is generally accessible during physical examination, many malignancies are not diagnosed until late stages of the disease. Early detection of these lesions is imperative in preventing malignant transformation of the precursor lesions or to be able to diagnose early the malignant lesions. This is achieved through multiple oral screening and detection techniques that are constantly being developed. An updated knowledge of these is thus critical for all practitioners.

Day II 26 January 2012 15:50 – 16:20

**Prof. Norikazu Ohno****Qualification**

DDS (School of Dentistry, Aichi-Gakuin University), 1969
PhD (School of Dentistry, Aichi-Gakuin University), 1973

Occupational Experience:

1973~1975 Assistant First Anatomy, Aichi-Gakuin University
1975~1982 Lecturer
1982~1991 Assistant Professor
1991~Present Professor Oral Anatomy Aichi-Gakuin University

Title: Peopling of Myanmar as Demonstrated by Genotyping of Urinary JC Virus DNA

Abstract: The genotyping of urinary JC virus (JCV) DNAs is a novel means of elucidating the origin of ethnic populations. We adopted this method to gain insights into the peopling of Myanmar. JCV genotype profiles at two sites of Myanmar, Yangon facing the Andaman Sea and Peinnebeen located in the central part of Myanmar, were reported previously. In this study, we elucidated JCV genotype profiles at three other sites of Myanmar. Chaungtha Beach facing the Bay of Bengal, Myitkyina located near China and Tiddim located near India. From the JCV genotype profiles at the five sites elucidated here and previously, it is suggested that SC, the southeastern-Asian/southern-Chinese subtype, mainly occurs throughout Myanmar, and that a few minor subtypes occur at southern and northern sites (Yangon, Chaungtha Beach and Myitkyina). Furthermore, using the whole-genome approach, we evaluated the phylogenetic relationships among various SC isolates detected in Myanmar and other countries. The results of this analysis revealed that SC diverged into various subgroups. Most were unique to Myanmar, while one was widespread in South China and southeastern Asia, including Myanmar. The present findings are consistent with the view that Myanmar was established by waves of human migration from neighboring regions.

Day II 26 January 2012 16:20 – 16:40



Dr. Nwe Nwe Aung



Education background
B.D.S., M.D.Sc. (Ygn.)
Lecturer/Head, Department of
Oral Biological Science,
University of Dental Medicine,
Yangon

Publications

1. Variations in the root and root canal morphology of permanent mandibular first molar
2. Occlusal surface morphology of permanent dentition of Myanmar (Bamar)
3. Dental traits among five tribes of Myanmar

Title: Dental Traits among Five Tribes in Myanmar (Burma)

Abstract: The presence or absence of 17 non-metric tooth crown traits was examined to investigate the intra and interregional variation of five tribes in Myanmar (Burma). In this study, we elucidated dental traits at five other sites in Myanmar: Kalaw and Peinnebin located in the central part of Myanmar, Tiddim located near India, Thandwe facing the Bay of Bengal and Myitkyina located near China. The Shans, the Chins, the Rakhines, the Palaungs, and the Kachins were identified from plaster models by using the Arizona State University Dental Anthropology System. The incidences of the five tribes were compared with other Mongoloid populations in various regions. According to multidimensional scaling based on Smith's Mean Measures of Divergence, all five tribes in Myanmar belong to Sundadonty. The prehistoric Burmese had more Sundadont elements than contemporary Myanmar populations. Myanmar was established by waves of human migration from geographical distances and did not correlate with the traditional linguistic classification. Myanmar populations should be categorized taking into consideration a genetic influence from China as well as the theory of local evolution.

Day II 26 January 2012 16:40 – 17:00



Dr. Bo Bo



Education background
BDS (1991) IDM (Ygn)
MDSc (1998) IDM (Ygn)
Dip Med Ed (2009) University
of Medicine Mandalay

Working and teaching experience

Working as a dental officer at Ahlone Township School health team (NGO) in 1991-1992 academic year. Joined the Myanmar government service (MOH) in 1993. In 1998 Sept, joined the Dental

anatomy and Physiology Department, IDM, Yangon and served as a demonstrator and an assistant lecturer since 2000 March. From 2000 June to 2007 August rendered the service at University Of Dental Medicine Mandalay as the lecturer and Head of the Department of Oral Biological science.

From 2007 Sept to up to date working as an assistant professor/ Head of Oral Biology Unit/School of Dentistry, International Islamic University Malaysia, Kuantan, Pahang, Malaysia.

Academic activities

Member of Myanmar Dental Association

Fellow of ICCDE

Associate member of Malaysian Dental association

Title: Does visual perception have more impact for effective learning in dental anatomy (Tooth carving practical session)

Abstract: Tooth carving practical sessions usually in wax are indispensable for the achievement of course objectives in teaching Dental Anatomy to initiate and develop the psychomotor skills of the students which are really essential in forthcoming clinical years since dentistry is stated as science of arts. A randomized controlled single blind cross-sectional interventional study was carried out in two consecutive first year dental batches, at school of dentistry, International Islamic University Malaysia. Ninety students were randomly divided into two groups based on equal gender ratio and assigned to do wax tooth carving of 11(permanent maxillary right central incisor). One group received conventional class room instructions from instruments handling to detailed carving procedure. The other group received verbal instructions for instruments handling and detailed carving procedure was displayed by a video clip developed by the Oral Biology unit. Both groups were allowed to do the carving for two hours exactly. The student performance was evaluated from the finished carved wax tooth models. Grading based on the resemblance to that particular natural tooth was scored by the expert blinding that which group received video display. Better students' performance for general resemblance was found in the group where a video clip was displayed ($p < 0.05$). However, for the particular surfaces, the grades achieved for the mesial and distal surfaces were statistically significant ($p < 0.05$) only. Findings for the rest of the surfaces (labial, lingual, incisal) were not statistically significant ($p > 0.05$).

Day II 26 January 2012 17:00 – 17:40

**Dr. Norhasnida Nordin****Curriculum Vitae**

- Obtained basic dental training at the University of Indonesia, Jakarta
- Graduated from Edinburgh Postgraduate Dental Institute with a specialty degree in Prosthodontics (MClint Dent in Prosthodontics)
- Deputy Dean of Students Affairs and Clinical in Faculty of Dentistry, Universiti Teknologi MARA, Shah Alam, Malaysia

- Coordinator for Dental Materials and Technology, Faculty of Dentistry, Universiti Teknologi MARA, Shah Alam

Title: Direct or Indirect Restoration?

Abstract: Lecture Synopsis: The decision-making process involved when choosing to use either a direct or an indirect approach for any given clinical situation can be difficult. which has at one end direct restorations and at the other indirect restorations. There will never be a completely black and white guide to the decision and grey areas will always exist.

This lecture will discuss definition, limits, advantages and disadvantages of the direct and indirect restoration. Besides that, specific clinical procedures which are crucial elements for attaining optimal functional and aesthetic outcome such as core build-up, impression taking, temporary cementation and temporary crowns will also be highlighted.

Workshop Synopsis: Participants will be introduced with hand on experience on

- Resin core buildup techniques
- Impression taking and temporary crown fabrication
- Cementation techniques
- Hands-on using the DENTSPLY Core and Post System using the typodont teeth

Day III 27 January 2012 8:30 – 9:00

**Dr. Ni Ni Win****Education background**

1998 MBBS (Yangon)
2005 PhD (Tokyo Medical and Dental University)
2011 American Heart Association Certify instructor of Basic Life Support for Healthcare Providers

Working and teaching experience

- 1999 Houseman ship training at Yangon general hospital, Myanmar
- 2000 Postgraduate (PhD) course in Graduate School, Tokyo Medical and Dental University (TMDU), Japan
- 2005 Research fellow of TMDU (- 2007)
- 2007 Assistant professor at International Islamic University Malaysia
- 2010 Lecturer at International Medical University (to date)

Title: Basic Life Support for General Dental practitioner

Abstract: Cardiac arrest remains a substantial public health problem and leading cause of death in many parts of the world. Cardiac arrest occurs both in and out of the hospital (dental clinic). General dental practitioners have chance to face with cardiac arrest in medically compromise patients who having cardiovascular diseases (angina pectoris, myocardial infarction, valvular disease, arrhythmia, or uncontrolled hypertension). Unpredictable cardiac arrest due to vaso-vagal reflex (VVR), or exacerbation of basic diseases may be caused by stress including pain, fear and anxiety, or vasoconstrictor (epinephrine) contained in local anesthetic in dental treatment. In daily dental practice, chocking with teeth, denture or other materials which usually used in dental practice is also risk factors leading to cardiac arrest especially for children and old aged patients.

I will discuss how to perform basic life support (cardio pulmonary resuscitation: CPR) in out-of-hospital settings including how to initiating chain of survival, how to perform prompt, high-quality chest compression for adult, child, and infant victims, how to practice 2-rescuer team CPR, how to relieve chocking and use of an Automated External Defibrillator (AED).

I will emphasize the 2010 American Heart Association Guideline for CPR and emergency cardiovascular care recommendations for healthcare providers especially changes in basic life support (BLS) sequence, continued emphasis on high-quality CPR (including hand-only CPR), with minor changes in compression rate and depth, additional changes regarding cricoid pressure, pulse check, and AED use in infant.

Day III 27 January 2012 9:00 – 10:00



Prof. Aung Tun Thet



Senior Advisor, UN Resident Coordinator (Myanmar)
Senior international and national public servant with recognized expertise of Capacity Development, Leadership and Management Development, Change management, Institutional strengthening, Organizational Development, Development Economics, Human Resources Development, Evaluation, Project Cycle Management, Governance, Human Rights,

Results-Based Management and Health Economics in a multi-cultural environment.. Extensive experience of capacity building of national institutions, private companies, local and international non-governmental organizations and UN organizations in Myanmar and in other countries.

Career

2009 to date: Senior Advisor to the UN Resident Coordinator (Myanmar); Independent Consultant; Visiting Professor at Institute of Economics, University of Public Health, University of Twente (Netherlands)
2001 - 2008 Principal Officer, UN System Staff College, Italy Turin
2000 - 2001 UNICEF Regional Planning, Monitoring and Evaluation Officer for East Asia and Pacific, (Bangkok).
1997 - 2000 UNICEF Senior Planning and Programming Officer, based in Bangladesh
1992 - 1997 UNICEF Headquarters, Head of Costing and Economics Unit
1989 - 1992 Director-General, Department of Planning and Statistics, Ministry of Health and Secretary of the National Health Committee, Myanmar
1966 - 1989 Faculty of Economics, University of Yangon, Myanmar

Qualifications & Professional awards

Alexander von Humboldt Post Doctoral Fellow, Marburg (Germany) (1986 - 1989)
Ph.D. in Management Sciences University of Manchester Institute of Science and Technology (UMIST) (UK)
M.Sc. in Management Sciences and Operational Research, University of Warwick (UK)
Post-graduate diploma in Management Studies (DMS) Brighton University (UK)
B.Com (Yangon)
Colombo Plan Fellow [U.K.] (1971 - 1977)
Certified Emotional Intelligence Facilitator/Trainer
Certified Professional Facilitator/Trainer in Teambuilding

Title: Managing Change

Abstract: Change is the most important element in the current dynamic situation in Myanmar. Institutions (MDA) and individuals have to adapt a positive attitude to change. The seminar on Managing Change examines how Dentists can understand, plan, implement and consolidate change.

Day III 27 January 2012 10:00 – 10:30



Prof. Masahiro Umino



Qualifications

IJBDA (Instructor of Japanese Board of Dental Anesthesia), November 1994
JBDA (Japanese Board of Dental Anesthesia), March 1977
PhD, December 1979
DDS, June 1968

Education

School of Dentistry, Tokyo Medical and Dental University, April 1962- March 1968

Work experiences

Scientific Advisor TTI Ellebeau Inc, May, 2009
Emeritus Professor, Tokyo Medical and Dental University, (TMDU) April 2009
Advisory Board, Union of Risk Management for Preventive Medicine, February, 2009
Dean of Library, TMDU, August 2005 - July 2007
Vice President of Dental hospital, TMDU, April 2002 - 2005 march
Dean of Student Affairs, TMDU, April 1998 - March 2001
Professor, Anesthesiology and Clinical Physiology, Department of Oral Reconstitution, Division of Oral Health Sciences, Graduate School, TMDU, April 2000
Professor, Department of Dental Anesthesiology, Faculty of Dentistry, TMDU, April 1995 - March 2000
Associate Professor, Department of Geriatric Dentistry, Faculty of Dentistry, TMDU, October 1989 - March 1995
Lecturer, Department of Dental Anesthesiology, Faculty of Dentistry, TMDU, July 1976 - September 1989
Lecturer, The Second Department of Oral Surgery, Faculty of Dentistry, Niigata University, April 1975 - June 1976
Assistant Professor, Department of Dental Anesthesiology, Faculty of Dentistry, TMDU, June 1971 - March 1975

Title: Monitoring and Intravenous Sedation for Dental Implantation

Abstract: The dental implantation is invasive and stressful surgery because of drilling and long-time procedures. Somatic stress such as drilling enhances the sympatho-adrenal system, resulting in release of catecholamine such as adrenaline and noradrenaline into the blood stream. The increased catecholamine in the blood causes hypertension, tachycardia, and arrhythmia. The emotional stress such as apprehension, fear and anxiety to dental implantation also triggers excessive response of cardiovascular system. Therefore, monitoring including blood pressure, heart rate, electrocardiogram, and pulse oxymetry is very essential to observe cardio-respiratory function in dental implantation.

Intravenous sedation is very effective to prevent excessive cardiovascular and emotional responses under invasive and stressful dental implantation. Monitoring should be needed whenever a patient is sedated.

My presentation will include usefulness of monitoring and intravenous sedation to safely manage patients during dental implantation.

Day III 27 January 2012 10:30 – 11:00

**Prof. Haruhisa Fukayama****Education and work experiences**

- 1981 Graduated from Tokyo Medical and Dental University (TMDU), Faculty of Dentistry
- 1981 Postgraduate (PhD) course in Graduate School, TMDU
- 1984 Resident at National Hospital for Sick Children, Department of Anesthesiology and Intensive Care Medicine

- 1985 Resident at Saitama Medical College, Department of Anesthesiology
- 1985 Instructor of TMDU, Dental Hospital, Department of Dental Anesthesia
- 1986 Assistant professor of TMDU, Dental Hospital, Department of Dental Anesthesia
- 1989 Research fellow of UCLA (- 1991)
- 1995 Lecturer of TMDU, Dental Hospital, Department of Dental Anesthesia
- 2001 Associate Professor of TMDU, Graduate School, Anesthesiology and Clinical Physiology
- 2004 Professor, Tsurumi University, School of Dental Medicine, Department of Anesthesiology
- 2010 Professor and Chair of TMDU, Graduate School, Anesthesiology and Clinical Physiology.

Professional qualifications

- 1981 Doctor of Dental Surgery (Ministry of Health and Welfare, Japan)
- 1985 PhD (Tokyo Medical and Dental University)
- 1985 Japanese Board of Dental Anesthesia (JBDA) (Japanese Dental Society of Anesthesiology)
- 1995 Board Certified Dental Anesthesia Specialist (BCDAS), or, Consultant of Dental Anesthesia Specialist (CDAS) (Japanese Dental Society of Anesthesiology)

Title: A New Electric Injector for Infiltration Anesthesia

Abstract: Infiltration anesthesia is one of the routine procedures for dentistry and traditional syringe systems have been used for the purpose. These decades, some electric powered injection systems were introduced and utilized in the dental practices. They have enabled us to inject anesthetic very slowly, concentrate on the injection site and move the syringe without holding tight, which are advantageous to both the patients and the practitioners. These appliances are, however, too heavy, too big, too troublesome for preparation or too uneasy to handle.

A new electric injector, Anaject (TM), is light weight, small and easy to prepare and handle. In addition, the system has a unique characteristic that has 6 ways of flow rates. Using the volunteers, we investigated the optimum increasing manners for less pain infiltration injection and the best one was found in 2006. The less-pain increasing patterns were implanted in the new electric injector. Before the new injector was commercially available, we compared the functions and styles among the other electric injectors by questions for the dental residents in 2010. The results showed the new injector was superior to the existing ones. Also, how the general practitioners expect the machine and what should be revised before the market were investigated in 10 institutions in 2011. The results revealed some improvements were needed for better performance.

In conclusion, the series of the 3 reports contributed much to the new machine. It is expected to be used for the painless and precise injection for infiltration anesthesia in dental practices.

Day III 27 January 2012 11:00 – 11:30

**Assoc. Prof. Makoto Shiota****Education/training**

- DDS, 1974-80 School of Dentistry, Tokyo Medical and Dental University (TMDU) Tokyo, Japan
- PhD, 1980-1984 Graduate School, TMDU, Tokyo, Japan
- Thesis: Histological Investigation of Apatite Ceramics Used as Immediate Endosseous Implant Geneva University, Geneva, Switzerland
- 1996 School of Dentistry, Researcher Overseas of the Ministry of Education

Field or area of accomplishment

- Oral Implantology
- Biomaterials/ Hydroxy Apatite, TCP
- Dental technique/ Electroforming Method

Professional appointment

- 1984 April Dental Resident TMDU, Tokyo
- 1988 April Research Associate TMDU, Tokyo
- 1996 September Associate Professor, TMDU, Tokyo

Academic activity

- 1984 March DDS
- 1988 March PhD TMDU, Tokyo, Japan

Title: Clinical Outcome of Various Types of Bone Substitute

Abstract: Implant treatment is generally accepted to be a requisite for modern practical dentistry. This growing presence of implant treatment is mainly supported by the advancement of bone substitutes and bone augmentation methods. To enlarge implant's indications and realize the improvement of therapeutic outcome, bone augmentation using bone substitutes such as sinus lift, onlay graft and inlay graft is essentially inevitable. Requirements for bone substitutes are superior biocompatibility, adequate strength, sufficient workability and easy manageability. Autogenous bone meets almost completely these requirements and also possesses bone-inducing capacity attributed to endogenous osteogenic cells. For these reasons, it has been mentioned for years that autogenous bone is the gold standard for osseous grafting material. However, autogenous bone has some clinical problems including invasion to the donor site, prolongation of surgical operative duration, restriction of harvestable volume and less storage stability. Moreover, the decreasing of augmented volume according to chronological resorption was reported in recent years. To overcome these difficulties, various bone substitutes such as allograft, xenograft, alloplast have been developed and improved. These materials were applied to augmentation surgery independently or in conjunction with growth factors. In this lecture, the progress of implant dentistry supported by bone substitutes will be presented.

Day III 27 January 2012 11:30 – 12:00

**Assoc. Prof. Susumu Nakachi****Education and work experiences**

- 1967 Graduated from Kyushu Dental College (KDC).
- 1967 Postgraduate Clinical Training Course in Oral Surgery Department, Tokyo Medical and Dental University (TMDU).
- 1969 Postgraduate Clinical Training Course in Dental Anesthesia Department, TMDU.

- 1972 Instructor of TMDU, Dental Hospital, Department of Dental Anesthesia.
- 1974 Instructor of Oral Surgery Department, Sapporo Medical University (SMU).
- 1975 Clinical Training Course in Anesthesia Department, SMU.
- 1976 Research fellow of Department of Physiology, SMU
- 1979 Associate Professor, Department of Dental Anesthesiology, KDC.
- 1983 Private Practise in Kichijoji, Musashino-City, Tokyo.

Professional Qualifications

- 1967 Doctor of Dental Surgery (Ministry of Health and Welfare, Japan).
- 1979 PhD (Sapporo Medical University)
- 1977 Japanese Board of Dental Anesthesia (JBDA) (Japanese Dental Society of Anesthesiology).

Title: Titanium implant: the IAT EXA Implant in Japan

Abstract: IAT stands for Intelligent Artificial Teeth. The new Implant System was developed jointly by the Department of Oral Biomaterials and Technology, School of Dentistry at Showa University and Ishifuku Metal Industry of Japan. Since 1988, basic research has been conducted at Showa University. In 1995 Ishifuku Metal Company manufactured a pressfit type i.e. cylindrical form and in 2002 it also made a spiralfit type i.e. screw form. JIS grade 2 titanium manufactured by Kobe Steel was used as the core material. JIS grade titanium is high grade pure titanium used for implants. Wire-type electric discharge machining is applied during the process of manufacturing endosseous titanium implants using computer technology. Electric discharge machining surface offers a high contact rate of over 95% and has a low infection rate. The biomechanical implant body design has a special thread for the screw type. The Internal tapered Twin-hex System is good for connecting fixtures and abutments. It also has a System of Platform Switching for protecting absorption of bone margin. In my experience in using implants, I think that the new IAT Implant System offers greater bone affinity, higher precision and higher quality.

Day III 27 January 2012 12:00 – 12:45

**Prof. Ashish Kakar****Education/training**

Dr. Ashish Kakar is a graduate from Maulana Azad Dental College and Hospital. He attained his Masters Post-graduate from Eastman Dental Hospital, London in Prosthetic Dentistry and Graduate Certificate speciality in Prosthodontics from UMDNJ-NJ Dental School, USA. He has been in private Practice in India for over 15 years with special emphasis on Dental Implantology and

Prosthodontics. He is Senior Consultant at Indraprastha Apollo Hospitals, New Delhi. He has several international presentations including papers at the IADR, WCOI, ICOI-AP section and ICOI World Congress.

He is the founding President of the Academy of Oral Implantology. He is also a Adjunct Assistant Professor at UMDNJ. NJ dental School, Newark, USA

He has extensively published internationally and is the author of Textbook- '*Oral Implantology*'.

Title: Trends Technology and Innovations in Implantology

Abstract: During the past decade, improvements in surgical and prosthetic predictability have increased the long-term clinical success of dental implants. Dental implants have now become an accepted treatment option for many patients requiring tooth replacement therapy. Patients are becoming educated and asking intelligent questions about their treatment options including use of dental implants.

The predictable esthetic and functional outcomes of care, as with any dental procedure, depend on comprehensive diagnostic and treatment planning. Implementation of dental implants into the general practice can be a stress free, highly profitable and rewarding experience provided that you follow parameters given at this course. Otherwise learning by trial and error can be stressful, litigious and costly in many ways.

The presentation shall discuss new innovations in the field of Implant dentistry like Implant design to simplify the implant placements, Platform switching and its clinical implications, use of CBCT and CT guides for Implant planning, use of synthetic bone grafts like Easy-Graft to get predictable results in Implant dentistry and use of hard and soft and Hard tissue LASERS in Implant dentistry.

Case presentations shall be done to explain and justify the simplified clinical techniques.

Day III 27 January 2012 13:50 – 14:10

**Dr. Thet Naing****Education background**

Graduated with BDS from University of Dental Medicine, Yangon in 1994, and obtained MDSc degree from the same university in 2004.

Working and teaching experience

Working as a dental surgeon at the township school health department, Bogale township, Ayeyarwaddy Division, Myanmar from 1997 to 2002.

In service trainees pool at Department of Health, head office, from 2002 to 2003.

Working as a clinical teaching staff at the University of Dental Medicine, Mandalay after the completion of MDSc degree from 2003 to 2009 as a demonstrator at the Department of Paediatric Dentistry and Orthodontics.

As an assistant lecturer from 2009 onwards at the Paediatric Dentistry and Orthodontics, University of Dental Medicine, Mandalay

Title: A study of the method for taking natural head position cephalogram

Abstract: A technique for recording and transferring the natural head position to cephalogram was developed and tested. The fluid level device was used to catch up the natural head position. The fluid levels on the cheek of the subject were marked and taped by radio-opaque markers (paper pin heads) and the head was placed in the cephalostat according to the recorded natural head position. The stainless steel pendulum sting was also dropped from cephalostat for the reference true vertical line. The relationship of true vertical line and recorded horizontal line connecting two radio-opaque markers was tested. The mean value was 89.43 degree, mean difference was 0.6 degrees and standard error was 0.32. The subjects were randomly selected from patients who would take orthodontic treatment at Orthodontic Division, Department of Children's Dentistry and Orthodontics. Altogether 50 subjects, 18 males and 32 females with an age range of 14 to 25 years were included. The capability of the device was analyzed with one-sample "t" test, with a test reference at 90 degrees. The difference between the two means 0.82 was not significant at $p = 0.05$ level. The reproducibility of the method was studied on 20% of total subject by double determination, analyzed with paired "t" test. There was no significant difference in the means of two measurements (mean diff. = 0.07 degree, standard error = 0.51). This method of recording and transferring the natural head position to cephalogram using the test device is reproducible but still need modifications of the device.

Day III 27 January 2012 14:10 – 14:30

**Dr. Tin Aung****Education background**

BDS from University of Dental Medicine (Yangon) in 1998

Working and teaching experience

2000-2007 School Health Department, Loilem Township- Shan State
2007-2009 Hopone Township Hospital-Shan State
2009-to date Pin Loan Township Hospital, Shan State

Title: Intraosseous hemangioma of the mandible: A case report

Abstract: Intraosseous vascular malformations are rare conditions and the most common location is vertebral column and skull. Central hemangioma of the mandible and maxilla is extremely rare and considerably more common in female at second decade of life. Although the mucosal and soft tissue lesions are suspected by their clinical appearance, the intrabony lesions may difficult to distinguish visually. The lesion may be completely asymptomatic and mobility of teeth or bleeding from gingival sulcus may occur. The most frequent radiographic appearance is multilocular radiolucent defect with honey comb or soap bubble appearance. A case of 16 year old male who presented with painless slow growing swelling of mandible, radiological and histological features of intraosseous hemangioma involving mandible is reported. This report stresses the importance of surgical judgments.

Day III 27 January 2012 14:30 – 14:50



Dr. Kumudra Kyaw



Education background
Obtained B.D.S degree in 2003 from University of Dental Medicine, Yangon and M.D.Sc in 2011 from the same university

Working and teaching experience
Dental Surgeon at Oktwin Hospital, Bago Division, Department of Health (from September, 2005 to date)

Title: Use of Interdental Brush (Modified Oral Brush Biopsy) in Evaluation of Potentially Malignant Disorders of Oral Mucosa

Abstract: Early detection is the most effective approach to decrease the mortality and morbidity of oral cancer which is one of the global health problems. Oral brush biopsy (OralCDx) has been developed as an adjunctive technique in early detection of oral cancer since 1999. The aim of this study was to determine the sensitivity and specificity of modified oral brush biopsy (interdental brush) instead of OralCDx brush in evaluation of potentially malignant disorders of oral mucosa. Fifty-seven patients with potentially malignant disorders of oral mucosa attending University of Dental Medicine, Yangon were examined. Each patient underwent two oral brush biopsy procedures using OralCDx brush and interdental brush followed by scalpel biopsy. Sensitivity and specificity were calculated separately for cytological smears taken by different types of brushes with reference to scalpel biopsy results. By using OralCDx brush, the sensitivity of 80.95%, specificity of 85.71%, the positive predictive value of 77% and negative predictive value of 88% were revealed. With the interdental brush, the sensitivity of 78.94%, the specificity of 81.81%, the positive predictive value of 71% and the negative predictive value of 74% were observed. A good agreement between cytological results of two different types of brushes was noted (Kappa value = 0.826). The results demonstrate that modified oral brush biopsy technique using interdental brush is cost effective and applicable method with reasonable sensitivity and specificity in detection of epithelial dysplasia.

Day III 27 January 2012 14:50 – 15:10



Dr. Aye Mya Thida



Education background
B.D.S. (Ygn.), 2004
M.D.Sc. (Ygn), 2011

Working and teaching experience
Demonstrator, Department of Paediatric Dentistry and Orthodontics, University of Dental Medicine, Yangon - 2005 to present
Private Dental Practice - 2005 to date

Title: Maturational Evaluation of Ossification of the Mid-palatal Suture

Abstract: Assessing the timing of adolescent (pubertal) growth spurt is important in orthodontic treatment planning. There are many indicators to assess the pubertal growth spurt. Skeletal maturity indicator by using hand-wrist radiograph is one of them. Like all craniofacial sutures, mid-palatal suture becomes more tortuous and interdigitated with increasing age but it is not completely closed at the end of adolescence. After adolescence, bone spicules will have interlocked the suture to such an extent that skeletal expansion becomes unlikely but not impossible. The purpose of this study was to determine whether a positive correlation exists between adolescent skeletal maturational development and the approximation of the mid-palatal suture.

Fifty-three Myanmar children aged 8 to 18 years participated in this study. Hand-wrist radiographs and standard occlusal radiographs of these subjects were taken by using a dental X-ray machine. On hand-wrist radiograph, the skeletal maturity assessment (SMA) system of Fishman (1982) was used to assess skeletal maturation. Percentage of fusion of mid-palatal suture was evaluated in standard occlusal radiograph by using Image J software. Then, correlation between the maturational stages in hand-wrist and mid-palatal suture were analysed. Highly significant association (Correlation coefficient = 0.862) was observed between Skeletal Maturity Indicators (SMI) stages and percentage of fusion of mid-palatal suture. ($p < 0.001$) It can be concluded that the percentage of fusion (approximation) of the mid-palatal suture on standard occlusal radiograph can be used as one of the indicators to assess the growth spurt.

Day III 27 January 2012 15:10 – 15:30

**Dr. Thiha Myint Wei**

Education background
B.D.S, (Ygn), 2004, UDM, (Ygn)
M.D.Sc, (Ygn), 2011, UDM, (Ygn)

Working and teaching experience
Private dental clinic – since 2005
Demonstrator - Dept of OBS, UDM, Ygn. 2005-2008
Demonstrator - Dept of OMFS, UDM, Ygn. 2008-now

Title: The effectiveness of submucosal injection and oral dexamethazone in post-operative morbidity of impacted third molar surgery

Abstract: The surgical extraction of lower third molar is the most frequent intervention in oral surgery. This procedure is often associated with significant post-surgical sequelae that may have both a biological and social impact, and patients frequently complain of pain, swelling and limitation in mouth opening due to the inflammatory response following the surgical injury. The effectiveness of oral dexamethasone 4 mg and submucosal injection of dexamethasone 4 mg in surgical removal of lower third molars were studied. Fifty-one healthy patients, age range between 20 to 34 years who needed to extract unilateral side of upper and lower third molars were randomly assigned for either one of the three, oral dexamethasone 4 mg, submucosal injection of dexamethasone 4 mg and not received any dexamethasone administration. Facial edema, trismus and pain were evaluated on the 1st, 2nd, 3rd and 7th postoperative day. An ANOVA analysis revealed that both submucosal injection and oral dexamethasone significantly reduce postoperative edema, trismus and pain when compare with the control on postoperative 1st, 2nd and 3rd day ($P < 0.001$). Submucosal injection of dexamethasone 4 mg significantly reduce postoperative edema than oral dexamethasone 4 mg ($P = 0.005$). The submucosal injection of 4 mg dexamethasone at the time of operation was the most effective in the prevention of postoperative edema, trismus and pain among these groups. The present study recommended that single dose of 4 mg of submucosal injection of dexamethasone is more preferable than 4 mg of oral dexamethasone in mild to moderate oral surgical procedure and can be used to reduce the common postoperative morbidity of pain, swelling and trismus.

Day III 27 January 2012 15:50 – 16:10

**Dr. Aung Thu Hein**

Education background
Obtained BDS degree from University of Dental Medicine, Yangon, Myanmar in 2005, MDSc specialized in Prosthodontics, from the same university in 2011.

Working and teaching experience
2005 – 2006: Demonstrator, Department of Oral Biological Science, University of Dental Medicine, Yangon
2006 - Demonstrator, Department of Prosthodontics, University of Dental Medicine, Yangon

Memberships

1. Member of Myanmar Dental Association (MDA)
2. Member of International Association for Dental Research (IADR)

Title: A study of effectiveness of soft lining in poorly fitting complete dentures

Abstract: Residual ridge resorption is physiologically an inevitable consequence of tooth loss and denture wearing. The commonest problem of long term denture wearers is looseness or poor fitting of the dentures due to continuous alveolar resorption. Insufficient retention of prostheses may lead to poor masticatory efficiency and reduced patient satisfaction. In this study, the effectiveness of soft liner in 22 patients wearing poor fitting complete dentures was determined and soft lined dentures were compared with new dentures in retention, maximal biting force and patient satisfaction. Retention of all study dentures was evaluated by Kapur's method, the maximal biting force was measured by using Unipulse Digital Bite Force Indicator and the patient satisfaction was assessed by modified Smith's method. The differences in retention scores of old dentures and soft lined dentures, and old dentures and new dentures, were statistically significant ($p < 0.05$). Both soft lined and new dentures provided higher retention than old dentures. There was no statistically significant difference between retention scores of soft lined dentures and new dentures ($p > 0.05$). The maximal biting force was significantly improved after soft lining the old denture and when the patient changing from old to new dentures ($p < 0.05$). Significant improvements in biting force were found after getting adaptation with both soft lined and new dentures. In terms of patient satisfaction scores of soft lined and new denture, there were no statistically significant differences in both at the time of delivery and after adaptation period ($p > 0.05$). This study concluded that soft liner could provide good retention, improve masticatory efficiency and patient satisfaction in poorly fitting complete dentures. Although soft liner could not completely substitute standard new denture treatment, it might provide functionally satisfied dentures with only a single visit chairside application.

Day III 27 January 2012 16:10 – 16:30

**Dr. Saw Nandar Aung****Education background**

Obtained BDS from University of Dental Medicine, Yangon, Myanmar in 2003, MDSc in 2011 from the same university

Working and teaching experience

2005-2006 – Demonstrator, Department of Oral Biological Science, University of Dental Medicine, Yangon, Myanmar
2006-2007 – Demonstrator, Department of Oral Medicine, University of Dental Medicine, Yangon, Myanmar

2007-to date – Demonstrator, Department of Preventive and Community Dentistry, University of Dental Medicine, Yangon, Myanmar

Memberships

1. Myanmar Dental Association
2. International Association for Dental Research

Title: Assessment of Oral Health Status and Awareness of Dental Problems among Young Female Adults

Abstract: The aim of the study was to assess the oral health status and awareness of dental problem among young female adults. A total of 294 (147 teachers from Thingungyun Teacher's Training College and 147 factory workers from North Okkala and South Dagon Townships, Yangon Division) participated in the study in which data concerning oral hygiene and dental visit behavior, oral health status and awareness were measured. A descriptive, cross-sectional, community-based, non-intervention type study design was used. Twice a day tooth brushing was reported by 82.3% of teachers and 78.2% of factory workers. Nearly half of teachers (43.5%) and only one-fourth (23.1%) of factory workers reported brushing after breakfast and before bed. About half of total sample responded spending three minutes for brushing and all of them used tooth brush and tooth paste. Three quarter of teachers (75.5%) answered using both vertical and horizontal brushing method while 43.5% of factory workers responded using horizontal method. Regarding with awareness score, teachers scored two times higher than that of factory workers (6.51 vs. 3.76). No statistical differences were found between two groups relating to clinical data, mean DMF-T 0.91 vs. 1.27, caries prevalence 35.4% vs. 44.2% and MNS for calculus 3.26 and 3.67 in teachers and factory workers respectively. There was significant relationship between oral health awareness and periodontal disease but not with dental caries. There was very weak negative correlation between awareness score and DMF-T was observed among the factory workers.

Day III 27 January 2012 16:30 – 16:50

**Dr. Aye Thet Oo****Education background**

2006: B.D.S University of Dental Medicine, Yangon, Myanmar
2011: Master of Public Health (MPH) Mahidol University, Faculty of Public Health, Bangkok, Thailand

Working and teaching experiences

1. Current position : Program Manager (Business Kind Myanmar)
2. July, 2011 – October, 2011: Intern (World Concern Myanmar)
3. December 2007 – February 2010: Volunteer (Oral Health Unit, DOH, MOH)
4. July 2007 – February 2010: Dental Practitioner (Private Dental Clinic)

Title: Oral health impact profile among Myanmar migrants, in Rangsit, Pathum Thani Province, Thailand

Abstract: This cross sectional study aimed to find the Mean Oral Health Impact Profile among Myanmar migrants in Rangsit, Pathumthani Province, Thailand. 217 Myanmar migrants, aged 18 years old and above reported on oral health impact profile, general characteristics, oral health belief, self reported oral health status and oral health behavior during 5th – 20th February, 2011. Data were analyzed by using mean test of Mann-Whitney and Kruskal Wallis.

The results reveal that the majority of the respondents were laborers and young adults under 35 years old. About 73% had fair oral health belief. 38% of respondents expressed that they had oral health problems and 42% thought they need dental treatment. Nearly half of them rated their oral health and general health as satisfactory level. 40% reported that they had dental problems while only 48% of them visited dentist. Mean oral health impact profile score for Myanmar migrant was 16.8. OHIP-14 mean score was significantly higher among older age groups (p -value = 0.312). It was found that OHIP-14 mean score was high among those who had good oral health belief (p -value = 0.006). People who brush their teeth frequently and those who never visited dentist before had low OHIP-14 score (p -value < 0.001). OHIP-14 score was higher among respondents who perceived they had dental problems, and needed dental treatment. People who satisfied and rated their oral health and general health at good and very good level had lower OHIP-14 score (p -value < 0.001).

Effective awareness raising program, oral health education, encouraging people to utilize oral health care services and health care card to receive regular basic dental care are suggested to reduce the oral health impact among Myanmar migrants.

Day III 27 January 2012 16:50 –17:10



Dr. San Thidar Aung



Education background
-BDS from University of Dental Medicine, Yangon, Myanmar in 2003
-MDSc from same university in 2011

Working and teaching experience
2005-2009 Demonstrator, Department of Oral Biological Science, University of Dental Medicine, Mandalay
2009-to date Demonstrator, Department of Dental Health University of Dental Medicine, Mandalay

Memberships

1. Myanmar Dental Association

Title: Correlation between sulcular and capillary blood glucose levels in periodontal patients by using glucometer

Abstract: By the close interrelationship between diabetes mellitus and periodontal disease, the dentists are likely to encounter huge amount of undiagnosed diabetic patients with periodontitis. Identification of the diabetic patient is important for the dentists to recognize the severity and complications of diabetes and consequently manage the patient accordingly.

The aim of the study is to correlate the sulcular (SBGL) and capillary blood glucose levels (CBGL) in periodontal patients by using glucometer. The random SBGL and CBGL also with modified gingival index were studied among sixty-five patients with no known history of diabetes mellitus. Fasting blood glucose level was measured in cases of more than 200mg/dL in random CBGL.

In this study, there was highly significant correlation between SBGL and CBGL regardless of gender, age, oral hygiene status and presence or absence of history of diabetes mellitus where $r=0.963$ and $p<0.001$ according to Pearson correlation. The mean SBGL and CBGL were $(111.6 \pm 78.3 \text{ mg/dL})$ and $(132.0 \pm 84.1 \text{ mg/dL})$ respectively. The 7 participants (10.8%) in this study were diagnosed as diabetic patients. The higher in modified gingival index score, the narrower in gap between measurement of SBGL and CBGL was observed.

This study did not recommend the use of sulcular blood for testing blood sugar during routine periodontal examination in stead of capillary blood but sulcular blood glucose testing can be used as an adjunct or emergency, non-invasive, safe and reliable means for detection of blood glucose level during routine periodontal examination.

Poster Presentation



Mr. Kenji Matsuura



Education background
1978 May The Nippon Dental University Graduation at 9 terms

Working and teaching experience
1989 October International technical contest Silver prize winning
1990 May Ken.Dentalx company establishment
1994 March ITI Straumann Implant of Switzerland Instructor assumption of office.

The Switzerland CM company attachment official-recognition instructor.

1997 March Corporation at Japan Dental technician Association Life recognition lecturer of training

2002 German WIELAND AGC Master Instructor

2003 KaVo CAD/CAM A system master laboratory

2003 April inaugurated as the teacher of the Nippon Dental University institute.

Title: Implant Superstructure Construction Methods

Abstract: Regarding the implants, anchors, over dentures and CAD/CAM's used for the implant superstructure construction, currently, there are many patients that cannot bite properly because dentures are not secure. This is caused by several factors.

Common complaints by patients include:

- Dentures separating when they are speaking.
- Pain in the gums.
- Food easily sticking in the dentures during meals.

These are just a few of the complaints among various others, and a method to increase the number of implants from 2 to 4 is a solution to these problems.

The benefits of anchored implants for over dentures:

- Due to the strong stability of the complete dentures via implants, the patient will be able to bite normally.
- Since only two implants are necessary for supporting the entire mouth, the medical expenses will be reduced.
- Maintenance is extremely simple because the patient can freely remove the dentures.
- There is no need for extensive surgical procedures so it is not a physically demanding treatment.
- Depending on the patient's condition, he/she may be able to eat normally soon after the treatment.

With benefits such as the ones stated above, there are big expectations for the future of implant treatments. Therefore, I would like to explain the laboratory operations and the steps in the treatment.

Poster Presentation



Dr. Moe Thauk

**Education background**

2007-to date
Studying Master of
Endodontics
School of Dental Sciences,
Universiti Sains Malaysia,
Kubang Kerian, Kota Bharu,
Malaysia.
2006-1990
General Dental practitioner
1981-1988
Bachelor of Dental Surgery
(B.D.S.)
Institute of Dental Medicine,
Yangon, Myanmar.

Title: Assessment of obturation on the simulated lateral canals of root canal system between heat only and heat associated with vibration technique

Abstract:

Introduction: Lack of adequate sealing of the lateral canals can cause secondary infection lead to root canal treatment failure. Root canal can be filled three dimensionally with heat-softened gutta-percha (GP) during obturation.

Objective: To evaluate the effectiveness of heat only and heat with vibration obturation techniques, by measuring the percentage of gutta-percha penetration length inside at the three levels of simulated lateral canals within a root canal system.

Methods: A quantity of 70 mandibular second premolar teeth was used in this experiment. Three simulated lateral canals with the diameter of 0.15 mm at coronal, middle and apical third on the distal root surfaces were created. All created teeth were randomly divided into two groups as Group A and B (n=35). Main canal of teeth in both groups were prepared with K3 rotary file in crown-down technique. Irrigation was performed alternate use of 5.25% NaOCl and 17% EDTA in both groups during canal shaping. Group A was obturated under AH-26 sealer coated gutta-percha (GP) with heat only continuous wave of condensation technique using system B heat source. Group B was obturated with AH-26 sealer coated GP under heat and vibration technique using DownPak device. Filled teeth were radiographed at the bucco-lingual direction and all images were transformed into a digital format. Length of the simulated lateral canals and GP penetration inside the lateral canals (coronal, middle and apical thirds) were measured by VixWin Pro 2000 software and the GP percentages inside the canals were calculated. Data were analyzed using one-way ANOVA test.

Results: Mean percentage length of GP revealed significantly higher at the apical third level of lateral canals ($p < 0.05$) by the using of heat associated with vibration technique.

Conclusions: Heat with vibration technique was found to be superior to heat only technique for obturation especially at the apical third level of root canal.

Poster Presentation



Dr. Myat Nyan

**Education background**

B.D.S.(1995), M.D.Sc(2003)
University of Dental Medicine,
Yangon, Myanmar
Ph.D. in the field of Oral
Implantology & Regenerative
Dental Medicine from Tokyo
Medical and Dental University
in 2010.

Working and teaching experiences

1996 - 1998 Private dental
clinic

1998 - 2001 Public Hospital, Pyapon Township
2001 - 2003 Demonstrator
2003 - to date Assistant Lecturer, Department of
Prosthodontics, University of Dental Medicine, Yangon,
Myanmar

Awards & Fellowships

Best Poster Award (FDI/Unilever Poster Award) in Annual World Dental Congress, Singapore (2009)
Best Paper Award, In Joint Educational Meeting of 8th FDI (World Dental Federation) and Myanmar Dental Association, 27th Myanmar Dental Conference, Yangon, Myanmar (2007)
Best Paper Award (Senior Scientist), In Joint Educational Meeting of 12th FDI (World Dental Federation) and Myanmar Dental Association, 31st Myanmar Dental Conference, Yangon, Myanmar (2011)
(2011) FICD - Fellow of International College of Dentists

Publications

1. Synthesis of novel oxide layers on titanium by combination of sputter deposition and micro-arc oxidation techniques. Dental Materials Journal Vol. 30 (2011), No. 5 p.754-761
2. Molecular and tissue responses in the healing of rat calvarial defects after local application of simvastatin combined with alpha tricalcium phosphate. Journal of Biomedical Materials Research Part B: Applied Biomaterials Vol 93B(2009): 65-73
3. Effect of the combination with simvastatin and alpha tricalcium phosphate on bone regeneration. Journal of Clinical Oral Implants Research Volume 20, Number 3 (2008): 280-287
4. Bone Formation With the Combination of Simvastatin and Calcium Sulfate in Critical-Sized Rat Calvarial Defect. Journal of Pharmacological Sciences 104 (2007): 4. 384-386

Topic: Potential Application of statins in Dentistry

Abstract: Statins are well-known for their anti-cholesterol property. However, statins have pleiotropic effects on immune system, nervous system, endocrine system, cardiovascular system and bone. Numerous studies showed that lipophilic statins augment bone morphogenetic protein-2 (BMP-2) expression in osteoblasts when applied locally. We recently reported that simvastatin, one of the lipophilic statins increases bone regeneration by promoting BMP-2 and TGF-beta (transforming growth factor-beta) in rat calvarial defects. Other recent studies reported that statins reduce periodontal attachment loss in animals and humans and its potential application in periodontal tissue regeneration. This poster will demonstrate possible application of statins in oral and maxillofacial tissue regeneration in Dentistry.

Poster Presentation



Dr. Khine Myat Thu

**Education background**

Passed the graduation examination for B.D.S. degree in December, 2011. (with Distinction in Prosthodontics)

Working and teaching experience

House surgeon internship (2012)
University of Dental Medicine, Mandalay.

Presentation

SEAADE/IADR-SEA (International Association for Dental Research-South East Asia)- Dentsply Student Clinician Program (2011), Singapore

Title: Coronal Leakage of Four Temporary Filling Materials

Abstract: Introduction: Temporary restorative materials are placed in access cavity to provide the coronal seal of the root canal. This in vitro study was designed to evaluate the coronal microleakage of four different temporary restorative materials used in endodontics: Material I, II, III, IV (MD.Temp, Orafil, Caviton, Zinc oxide eugenol).

Materials and Methods: Forty-four extracted human premolars were selected, and access cavity was prepared. Pulp chambers were filled with wet cotton pellets leaving approximately 4 mm coronally. Forty teeth were randomly divided into four experimental groups equally, and two control groups of two teeth. Access cavities in each group were filled with one of the test materials, and immediately put into the water. Tooth surfaces were then coated with nail varnish. Equal parts of 2% methylene blue and methylated alcohol were mixed to prepare a dye solution. Samples were immersed in dye for 10 days. Teeth were rinsed, dried, and sectioned mesiodistally and evaluated under a stereomicroscope at a magnification of x15 for linear dye penetration along cavity walls. Data were analyzed using Kruskal-Wallis and Tukey HSD tests.

Results: The lowest microleakage value was observed in Material (I) and (II), and the highest in Material (IV). Material (III) was not statistically different from Material (II) and (IV), but significantly higher in microleakage than Material (I).

Clinical Significance: Material (IV) ZnOE which is dissolvable in alcohol was the least effective material for preventing microleakage, while Material (I) and (II) provided the best sealing.

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Sedona Hotel Management and Staff
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Best T Toothpaste
BioSys Co., Ltd.
Brain Base Corporation
Colgate Toothpaste
Cool & 3D Toothpaste
DASTECH Implant
Deluxe Formula Toothbrush
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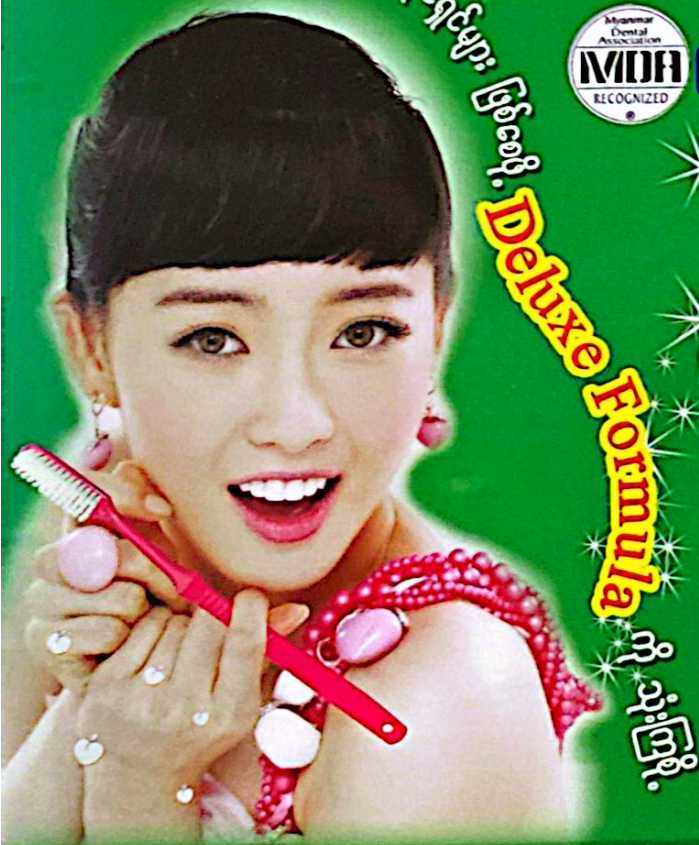
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For Everyday use



Colgate Total Toothpaste

- Clinically proven to act against bacteria for up to 12 hours
- Clinically proven to reduce plaque formation and gingival bleeding
- Anti-inflammatory action
- Provides caries protection



Colgate 360° Whole Mouth Clean Toothbrush

- To improve the cleaning of gingival margins and the interproximal area of vestibular surface of the teeth
- To clean the tongue and the inner sides of the cheeks



For Everyday use

Colgate 360° Whole Mouth Toothbrush

Colgate Total Toothpaste

Zero Cavity